Sec. 1 Be it ordained (resolved) by the Warrick County Council, Warrick County, Indiana, that for the expenses of the taxing unit the following additional sums of money are hereby appropriated out of the funds named and for the proposed specified, subject to the laws governing the same:

FUND	NUMBER	SCRIPTION SCRIPTION	AMOUNT REQUESTED	AMOUNT APPROVED
Adult Probation Superior Total Adult Probation Super	2002.44000.000.2002 Equ	uipment	\$5,500.00 \$5,500.00	5,500
Health Department	1159.22500.000.0000 Ani 1159.21375.000.0000 Vax	CONTRACTOR OF THE PROPERTY OF THE PERSON OF	\$3,705.00 \$631.00	3,705
Total Health Department	1109.21070.000.0000 1 4.		\$4,336.00	
Highway Donation Fund Total Highway Donation Fun	4103.08804.000.0000 Pea nd		\$208,864.58 \$208,864.58	Withdraw

Taxpayers appearing in the meeting shall have a right to be heard. The additional appropriations as finally made will be referred to the State Board of Tax Commissioners. The Board will make a written determination as to the sufficiency of funds to support the appropriations made within fifteen (15) days of receipt of a Certified Copy of the action.

Adopted this $\underline{5}$ day of $\underline{5ept}$, 2019.	
AYE	NAY
Charle Colombia	
S. Lewster.	
Varid Hackmaser	
Party Rich	
Ha milion	
They Richmond	
ATTEST: Deborah Stev	vens
Auditor Warrick County	



CERTIFIED COPY OF ADDITIONAL APPROPRIATION

State Form 55819 (R3 / 11-17)

PRESCRIBED BY THE DEPARTMENT OF LOCAL GOVERNMENT FINANCE

Section I When reporting the appropriation of bond proceeds, complete S	Continue I lines A. B. C. and E.o.	f Section II: Section III: or	ad Section IV			
	la Section IV.	H-24 No barre				
UNIT NAME: Warrick COUNTY NAME: Warrick				Unit Number:	J. 11	
COUNTY NAME:		County Number:	<u> </u>			
Date of Publication	· Standard					
Date of Publication	(month, day, year): 8/22/2019 Newspaper Name: Standard Date of Publication			DLGF US	E ONLY	
(month, day, year): 8/22/2019 Newspaper Name:				Date Received		
(month, day, year): 9/5/2019						
Date Resolution Passed (month, day, year): 9/5/2019		Order Number:				
			L	-		
Section II Complete a column for each fund for which the additional appro	nriations are heing made. Val	lues omitted from the she	et may impact the Departm	ent's review and approval	of the request	
Rows A and B should be completed using the fund number and may be found at: http://www.in.gov/dlgf/files/pdf/1708	fund name as listed on the Fu	ind Report of the Final 17	782 Notice issued by the De	epartment. A listing of thes	e values	
A. DLGF Fund Number	0011	0801	T			
B. Fund Name		3337				
b. Fund Marile	Adult Probation Superior	Health	Highway Donation			
C. Appropriation Amount Requested	\$5,500.00	\$4,336.00	\$202,864.58			
D. Amount by Reduction (Enter as a positive number.)						
E. Net Amount of Increase (C minus D.)	\$5,500.00	\$4,336.00	\$202,864.58	\$0.00	\$0.00	
Property Tax Levy (Line 16)		\$445,512.00	\$0.00	\$0.00		
2. Levy Excess (Line 15)						
3. PTRC from Local Income Tax (LIT) (Line 13A)						
LIT Levy Freeze Amount (Line 13B)						
5. Misc. Revenue (Line 8B) (See Note #1.)	\$300,000.00	\$192,253.00	\$15,000.00			
January 1 Cash Balance (Include investments.)	\$503,414.00	\$302,766.00	\$426,099.57			
7. Subtotal of Funds (Add 1 thru 6.)	\$803,414.00	\$940,531.00	\$441,099.57	\$0.00	\$0.00	
8. Less Circuit Breaker (Amount From Circuit Breaker Report)		\$9,709.00				
9. Total Funds (7 minus 8.)	\$803,414.00	\$930,822.00	\$441,099.57	\$0.00	\$0.00	
10. DLGF Approved Budget (Line 1C)	\$40,850.00	\$656,228.00	\$0.00			
Encumbered Appropriations Carried Forward From Previous Year		\$1,985.00	\$0.00	\$0.00	\$0.00	
12. Temporary Loans Outstanding as of January 1		\$1,000.00	\$0.00	40.00	ψ0.00	
13. Beginning Obligations (Add 10 thru 12.)	\$40,850.00	\$658,213.00	\$0.00	\$0.00	\$0.00	
14. Surplus Funds (9 minus 13.)	\$762,564.00	\$272,609.00	\$441,099.57	\$0.00	\$0.00	
15. Previous additional appropriation(s) approved since	000,000,00	C40.050.00	***			
January 1, less any reductions in appropriations.	\$20,000.00	\$40,252.00	\$0.00			
16. Amount transferred to the Rainy Day Fund (See Note #2.) 17. Surplus Funds Remaining (14 minus 15 minus 16.)	\$742,564.00	\$232,357.00	\$441,099.57	\$0.00	\$0.00	
Note #1: If amount report on Row 5 is higher than 8B amount	nt, then a revised Budget Fo	rm 2 must be attached	with the Additional Appro	priation Request.		
Note #2: Row 16 cannot be used for additional appropriatio	ns for the rainy day fund. Tra	ansfers to the rainy day	fund are entered as misc	cellaneous revenues on L	ine 5.	
Section III						
Please check the requested method for the Department to inform	n your unit of the status of the	Additional Appropriation	Request.			
Check One:						
	ty.gov and dstevens@warricko	county.gov				
E-mail Address(es)	ryigor and dotorono@namon	Journy,go.				
Follow Up Via Mail						
Mailing Address (Number	er, Street, City, State, ZIP Code)					
Section IV						
DEBORAH K. STEVENS FISH	cal officer of Audito	OR	, do hereby certify that	the above information is tru	e and correct.	
(Please Print)		lease Print)	,,,			

8/2-897-6110 Telephone Number